



State of New Jersey Political Party Affiliation Declaration Form

I, being a registered voter at the address listed below, do hereby declare that I wish to affiliate with the following political party:

- | | | |
|--|--|---------------------------------------|
| <input type="checkbox"/> Democratic* | <input type="checkbox"/> Republican* | <input type="checkbox"/> Green Party |
| <input type="checkbox"/> Libertarian Party | <input type="checkbox"/> Natural Law Party | <input type="checkbox"/> Reform Party |
| <input type="checkbox"/> U.S. Constitution Party | | |

OR

I, being a registered voter at the address listed below, wish to formally disaffiliate with any political party:

- ☐ Independent

Last Name _____

First Name _____ Middle Initial _____

Date of Birth: (month) _____ (day) _____ (year) _____

New Jersey Residence:

Street _____ Apt. No. _____

Municipality _____

County _____ Zip Code _____

Signature or mark of registered voter

Date

**If you are a registered member of the Green Party, Libertarian Party, Natural Law Party, Reform Party, U.S. Constitution Party or an Independent, you cannot vote in either the Democratic or Republican Primary.*

Declaration must be filed no later than 50 days preceding the primary in which the voter wishes to vote. A newly registered voter or a voter who has never voted in a primary election, can affiliate with the Democratic or Republican Party on the day of the Primary.



Office of the
Attorney General

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Division of
Elections

www.NJElections.org